## CERTIFICATE OF EFS FILING UNDER 37 CFR §1.8

I hereby certify that this correspondence is being electronically transmitted to the United States Patent and Trademark Office, Commissioner for Patents, via the EFS pursuant to 37 CFR §1.8 on the below date:

Date: February 5, 2010 Name: John G. Rauch, Reg. No. 37,218 Signature: /John G. Rauch/

February 5, 2010 Date

BRINKS HOFER GILSON &LIONE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE													
In re Appln. of:		Armin G. Ebrahimi et al.											
Appl Filed	n. No.: :	10/758,969 January 15, 2004					Examiner: Henry W. Orr						
	nt No.: e Date	7,574,651 August 11, 2009					Art Unit: 2176						
For:		VALUE SYSTEM FOR DYNAMIC COMPOSITION OF PAGES					Conf. No.: 6514						
Attor	ney Docket	t No.: 12729-35 (Y00044US02)					Customer No. 56020						
TRANSMITTAL													
Commissioner for Patents PO Box 1450 Alexandria, VA 22313-1450 Sir:													
Attached Is/are:  To/SB/131 Form: Request for Recalculation of Patent Term Adjustment In View of Wyeth* (1 page).  Fee calculation:  No additional fee is required.  Small Entity.  An extension fee in an amount of \$													
	Claims Re			Highest No.	Present		all Entity			mall Entity			
Total	After Ame	ndment	Minus	Previously Paid For	Extra	Rate x \$26	Add'l Fee	OR	Rate x \$52=	Add'l Fee			
Indep.			Minus			x 110		_	x \$220=				
First Presentation of Multiple Dep. Claim						+\$195			+ \$390=				
То									Total	\$			
Fee payment:													
	Please charge Deposit Account No. 23-1925 in the amount of \$ for												
	Payment by credit card in the amount of \$ (Form PTO-2038 is attached).												
	The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.18 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.												
			Respectfully submitted										

/John G. Rauch/

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